Weekly Influenza Surveillance Report

Maryland Department of Health and Mental Hygiene | Infectious Disease and Environmental Health Administration
Office of Infectious Disease Epidemiology and Outbreak Response

SYNOPSIS

During the week of April 3 - 9 (week 14) influenza activity in Maryland was "regional", with substantial influenza activity reported from two of five surveillance regions. That substantial activity was in the form of two influenza outbreaks: one caused by flu type A and the other caused by flu type B. Individual cases and hospitalizations continue to be reported in declining numbers. The State Laboratories Administration continues to report samples positive for influenza by PCR. This decline in activity is also being observed in states bordering Maryland.

PLEASE NOTE: Influenza is not a reportable condition in Maryland. As a result, we rely on select sources of information such as some (sentinel) clinical labs and physician offices, and the public. Because these sources cannot report all cases in the state, the counts contained in this summary do not represent the true number of cases of influenza in Maryland. They do provide valuable information about trends. All data are preliminary and subject to change.

INFLUENZA-LIKE ILLNESS SURVEILLANCE (ILINet)

During week 14, ten sentinel providers reported 113 (1.6%) of 7,089 visits to their practices were for ILI. This is below the state baseline of 5.6%.

This same week last season, when influenza activity peaked late in October of 2009 and was on the decline by December, the proportion of visits for ILI was 1.4%.

For more information on the US Outpatient Influenza-like Illness Reporting Network (ILINet), please visit our website: http://dhmh.maryland.gov/fluwatch and click on "ILINet Sentinel Providers".

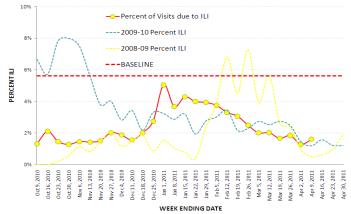


Figure 1. Proportion of visits for ILI to ILINet sentinel providers, 2010-11 influenza season

CLINICAL LAB REPORTS OF RAPID FLU TESTING

During week 14, twenty sentinel clinical laboratories reported 105 (9.7%) of 1,085 rapid influenza tests as positive: 22 were positive for type A, and 82 were positive for type B influenza. This proportion of positive tests is higher than the proportion reported at this time last season (2009-2010), which was 3.4%, and higher compared to the proportion observed during the peak of activity during the 2008-2009 season.

While not as accurate as PCR tests, rapid influenza tests become more accurate as the flu season progresses and as influenza becomes more prevalent in the community, giving insight into the activity of influenza.

	30%			
PERCENT POSITIVE	25%	Percent Positive		
	20%	2009-10 Percent Positive		
	15%	1 confine		
	10%	2008-09 Percent Positive		
	5%			
	0% -			
	0.00	Oct 9, 2010 Oct 15, 2010 Oct 25, 2010 Oct 25, 2010 Nov 5, 2010 Nov 32, 2010 Nov 27, 2010 Dec 11, 2010 Jan 1, 2011 Jan 12, 2011 Jan 15, 2011 Jan 29, 2011 Jan 29, 2011 Feb 15, 2011 Feb 15, 2011 Apr 15, 2011 Apr 25, 2011		
		WEEK ENDING DATE		

Figure 2. Proportion of positive rapid tests reported by sentinel clinical laboratories, 2010-11 influenza season

Type of Positives	Number (%)
Type A	4,816 (80%)
Type B	1,198 (20%)
Positive, but not typed	0
Total Positive	6,014 (100%)

Table 1. Number of positive rapid influenza tests, by type, reported by collaborating clinical laboratories 2010-11 season to date

GET VACCINATED!

Go to

http://dhmh.maryland.gov/swineflu/getVaccinated.html and find your local health department for more information.

MARYLAND RESIDENT INFLUENZA TRACKING SURVEY (MRITS)

During week 14, a total of 531 (35.7% of total) participants in the MRITS responded to the weekly survey. Of those who responded, 7 (1.3%) reported flu-like illness. This proportion is higher than this same week last season, when 0.8% of respondents reported flu-like illness.

We are always looking for more participants for the MRITS. If you know someone who would like to participate, please direct them to our website: http://dhmh.maryland.gov/flusurvey.

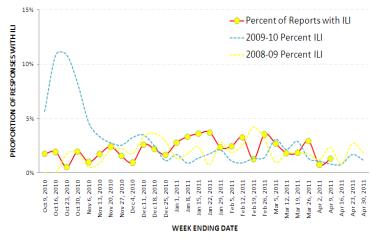


Figure 3. Proportion reporting ILI to the MRITS by week, 2010-11 influenza season

DHMH LABORATORIES ADMINISTRATION REPORTS

During week 14, the DHMH Laboratories Administration performed a total of 44 PCR tests for influenza. Twenty-five (25) were positive for influenza: 2 were type A (H1N1), 11 were type A (H3), and 12 were type B.

The table to the right shows the breakdown of positive tests by influenza strain for the 2010-11 influenza season to date.

More information on the valuable work done by the DHMH Laboratories Administration is available at http://dhmh.maryland.gov/labs.

Influ	uenza Type	No. (%)			
Type A					
	H1	711 (46.2%)			
	Н3	715 (46.5%)			
	Unsubtyped	0 (0%)			
Type B		113 (7.3%)			
TOTAL		1,539 (100%)			

Table 1. Number of respiratory samples positive for influenza by PCR reported by the DHMH Labs Administration, 2010-11 influenza season

EIP INFLUENZA HOSPITALIZATION SURVEILLANCE

During week 14, ten (10) hospitalizations associated with influenza were reported to the Emerging Infections Program (EIP) by 39 hospitals. To date, there have been 1,185 hospitalizations.

During the same week last season, 5 hospitalizations were reported, with a total of 1,447 at that point in the season. For the entire season (2009-10), 1,458 hospitalizations were reported.

To be a confirmed hospitalization associated with influenza, the person must be hospitalized and have a positive influenza test of any kind (rapid test, PCR, culture).

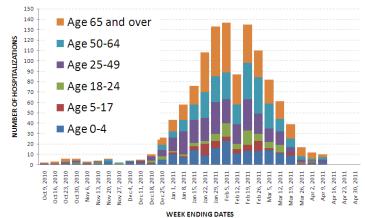


Figure 4. Number of hospitalizations associated with influenza, by age group and week, reported to the Emerging Infections Program, 2010-11 influenza season

REPORTS OF OUTBREAKS IN INSTITUTIONAL SETTINGS

During week 14, three outbreaks of respiratory disease were reported to DHMH. Two were influenza outbreaks; the other was an outbreak of pneumonia. This brings the season's total at 77 reported outbreaks. Last season, a total of 208 outbreaks of respiratory illness were reported. Of those, 33 were confirmed as influenza outbreaks.

An outbreak of ILI is re-classified as an outbreak of influenza if there is laboratory evidence of influenza virus present in the samples collected from casepatients during the outbreak.

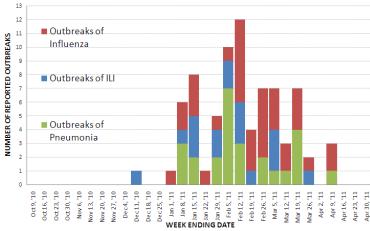


Figure 5. Number of outbreaks reported by week and by type during the 2010-11 influenza season.

EMERGENCY DEPARTMENT ILI REPORTS (ESSENCE)

During week 14, a total of 43,299 visits to emergency departments for all reasons were reported to the Office of Preparedness and Response through the ESSENCE system. Of those visits, 550 (1.3%) were for influenza-like illness. This proportion is in between those observed over the prior two influenza seasons and slightly lower than the previous week.

For more information on ESSENCE, please visit the Office of Preparedness and Response's web site at: http://bioterrorism.dhmh.state.md.us.

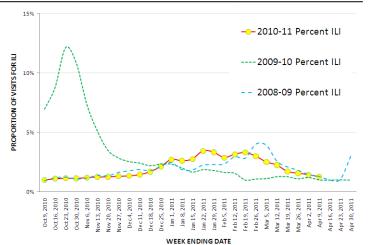


Figure 6. Proportion of visits to emergency departments for ILI by week reported through ESSENCE, 2010-11 influenza season.

GOOGLE FLU TRENDS

According to Google, influenza activity in Maryland is currently "LOW". What does this mean? From the Google Flu Trends Website: "We have found a close relationship between how many people search for flurelated topics and how many people actually have flu symptoms. Of course, not every person who searches for 'flu' is actually sick, but a pattern emerges when all the flu-related search queries are added together. We compared our query counts with traditional flu surveillance systems and found that many search queries tend to be popular exactly when flu season is happening. By counting how often we see these search queries, we can estimate how much flu is circulating in different countries and regions around the world."

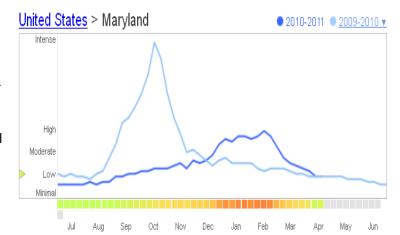


Figure 7 – According to Google Flu Trends, influenza activity in Maryland is currently "low". At this time last year, during the 2009 H1N1 influenza pandemic, influenza activity in Maryland was "minimal" to "low".

OFFICE OF INFECTIOUS DISEASE EPIDEMIOLOGY AND OUTBREAK RESPONSE

201 W. PRESTON ST.

BALTIMORE, MD 21201

PHONE: 401-767-6700

FAX: 410-669-4215

VISIT US ON THE WEB:

http://dhmh.maryland.gov

ALL THE INFORMATION INCLUDED IN THIS REPORT IS PROVISIONAL AND SUBJECT TO CHANGE AS MORE DATA ARE RECEIVED FROM SURVEILLANCE SOURCES.

THE INFORMATION INCLUDED IN THIS REPORT IS NOT INTENDED TO BE USED FOR INDIVIDUAL DIAGNOSES.

ONLINE VERSION OF THIS REPORT AND PAST SEASONS' REPORTS MAY BE DOWNLOADED AT:

http://dhmh.maryland.gov/fluwatch

FLU SURVEILLANCE IN NEIGHBORING STATES:

DELAWARE-

HTTP://BIT.LY/9Zkp3

DC-

http://tinyurl.com/yj7br9e

PENNSYLVANIA-

http://tinyurl.com/37323xn

VIRGINIA-

http://tinyurl.com/kmnaeu

WEST VIRGINIA-

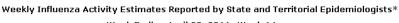
http://tinyurl.com/39m2kon

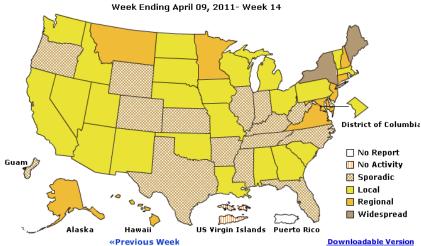
CDC NATIONAL INFLUENZA SURVEILLANCE REPORT

(http://cdc.gov/flu/weekly)

Synopsis: During week 14 (April 3-9, 2011), influenza activity in the United States continued to decrease.

- Of the 4,234 specimens tested by U.S. World Health
 Organization (WHO) and National Respiratory and Enteric
 Virus Surveillance System (NREVSS) collaborating laboratories
 and reported to CDC/Influenza Division, 387 (9.1%) were
 positive for influenza.
- The proportion of deaths attributed to pneumonia and influenza (P&I) has been at or above the epidemic threshold for 11 consecutive weeks.
- One influenza-associated pediatric death was reported, bringing the season total to 91. This death was associated with an influenza B virus.
- The proportion of outpatient visits for influenza-like illness (ILI) was 1.4%, which is below the national baseline of 2.5%. All 10 regions reported ILI below region-specific baseline levels. Two states experienced low ILI activity; 48 states and New York City experienced minimal ILI activity, and the District of Columbia had insufficient data to calculate an ILI activity level.
- The geographic spread of influenza in two states was reported as widespread; nine states reported regional influenza activity; the District of Columbia and 23 states reported local influenza activity; Guam and 16 states reported sporadic influenza activity; the U.S. Virgin Islands reported no influenza activity, and Puerto Rico did not report.





^{*}This map indicates geographic spread and does not measure the severity of influenza activity.